PTO/SB/06 (08-03) Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Rédúttion Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE BASIC FEE (37 CFR 1.16(a)) FEE OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI-ENT RATE **AFTER** ADDI-**PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) ENDM Minus OR Independent (37 CFR 1.16(b)) Minus OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\omega$ REMAINING PRESENT NUMBER RATE ADDI-RATE ENT ADDI-PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE ENDM Total Minus (37 CFR 1.16(c)) X S OR Independent (37 CFR 1.16(b)) Minus X S OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'I FFF OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST () REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-**AMENDMENT** AFTER AMENDMENT **PREVIOUSLY EXTRA** TIONAL TIONAL PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus X S OR Independent (37 CFR 1.16(b)) Minus = X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number

09/463082

CLAIMS AS FILED - PART I						SMALL	ENTITY		OTHER	THAN
		(C	(Column 1) (C		umn 2) TYP			OR	SMALL	
FOR		NUMBE	R FILED	NUMBER E	XTRA	RATE	FEE	1	RATE	FEE
BASIC FEE							345.00	OR	7 %	690.00
οĴ	TAL CLAIMS	2	Z_ minus 2	0= 2		. X\$ 9=		OR	X\$18=	36
NDEPENDENT CLAIMS 2 3 minus 3 = -				X39=		OR	X78=			
MULTIPLE DEPENDENT SU						+130=	<u> </u>	OR	+260=	14 T
If the difference in column tris less than zero, enter "0" in column 2						TOTAL	-	OR	TOTAL	1006
CLAIMS AS AMENDED - PART II							<del></del>	•	OTHER	
	re /	(Column:1)	<u> </u>		(Column 3)	SMÁLL	ENTITY	OR	SMALL	ENTITY
ENTA		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	• 30	Minus	- 20	= 10	X\$ 9=		OR	X\$18=	180.
AMENDME	Independent	• 4	Minus	··· 3	= 1	X39=		OR	X78=	78
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130=	-	OR	+260=	
		•				TOTAL		OR	TOTAL	2.5%
		<i>io</i> -t		(O-1, O)	<b>10</b> 1 0	ADDIT. FEE		10	ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)					
ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	• 1	Minus	**	9	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	<b>a</b>	X39=	•	OR	X78=	
***	FIHST PHESE	M 40 MOILAIM:	ULTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
						TOTAL		OR	TOTAL	
		<b>10</b> -1 A				ADDIT. FEE		JO. 1	ADDIT. FEE	
_		(Column 1) CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Column 2) HIGHEST	(Column 3)			1 1		
AMENDMENT C	· · · · · · · · · · · · · · · · · · ·	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMEI	Independent	• 4	Minus	4	= Ø	X39=			X78=	<u> Ο Ι-Ο</u> Ο
	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDENT CLAIM			<b></b>	OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+260=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

FORM PTO-875 (Rev. 12/99)